

## Retirement Plan Checklist

**Company Name:** \_\_\_\_\_ **Plan Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

**Type of Current Plan:** \_\_\_\_\_

**Total # of participants:** \_\_\_\_\_ **Total # eligible:** \_\_\_\_\_ **Total # active participants:** \_\_\_\_\_

Eligibility Requirements:

Are all employees eligible? Y/N \_\_\_\_\_ Enrollment via Provider or Sponsor: \_\_\_\_\_

Eligibility period: \_\_\_\_\_ Contribution Change Frequency: \_\_\_\_\_

Age Requirement: \_\_\_\_\_ Eligibility Monitoring via Provider or Sponsor: \_\_\_\_\_

Number of Locations: \_\_\_\_\_ Type of Workforce: \_\_\_\_\_

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**Current Plan Provider & Years with Provider:** \_\_\_\_\_

Participant education being offered? Group meetings? \_\_\_\_\_

Is Investment Advice Available? \_\_\_\_\_

Do you have a dedicated/local point of contact? \_\_\_\_\_

What level of fiduciary coverage is in place? \_\_\_\_\_

**Third Party Administrator & Years with TPA:** \_\_\_\_\_

**Total assets in the plan:** \_\_\_\_\_

Does the Plan have a Deferred Sales Charge? \_\_\_\_\_ How much? \_\_\_\_\_

**Estimated annual contributions:** Employee: \_\_\_\_\_ Employer Matching: \_\_\_\_\_ Profit Sharing: \_\_\_\_\_

Does Plan allow for Participant Loans? How many per participant? \_\_\_\_\_ Total # loans: \_\_\_\_\_

Is Distribution/Loan process difficult? Sponsor approval required? \_\_\_\_\_

Does the plan offer Internet and telephone access? \_\_\_\_\_

**Does the plan offer Self-Directed Brokerage account?** \_\_\_\_\_

If so, how many participants are involved? \_\_\_\_\_ Amount Invested in SDBA? \_\_\_\_\_

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What issues have you had with the Plan or Provider? \_\_\_\_\_

What enhancements would you like to make to the Plan? \_\_\_\_\_

Does your company offer a Non-Qualified Deferred Comp Plan? \_\_\_\_\_ If so, how many participate? \_\_\_\_\_

Does your company offer 529 College Planning? \_\_\_\_\_ Financial Planning? \_\_\_\_\_

**Please include a copy of the following:**

- Summary Plan Description / Adoption agreement / Most recent provider plan review
- Current Asset Statement listing fund choices and dollars in each fund
- 408(b)(2) Fee Disclosure Statement